

The authors take a very wide view of their specialty and claim that an individual's speech is defective if more attention is paid to how he speaks than to what he says. How well-advised they are to use the masculine gender! but what of our politicians and some of our better known actors?

L. G. KILOH.

The Psychology of Insanity. By BERNARD HART. 5th Edition, Cambridge University Press, 1962. Pp. 127. Price 6s. 6d.

This well-known little book attains its golden jubilee in a reprint (in paper covers) of the fifth edition. Its content has remained essentially unchanged since it first appeared in 1912. Many developments in psychopathology, as the author admits, have taken place since then, none of which are mentioned. Why then should this book continue to enjoy such esteem? Three features, amongst others, may be adduced in explanation, its lucidity, its balance and the evident quality of the author's mind. This book gives a brief and eminently readable account of the psychopathology fashionable at the close of the last century and the beginning of this, of the breakaway from the arid "school" psychology of the previous generation and the rise of "dynamic" concepts, of the days of Morton Prince and so-called "alternating personality" and the far greater names of James and Janet, whose great and enduring contributions tend to be too easily forgotten to-day. It thus forms an admirable introduction to the history of psychopathology up to the early years of this century. There is room for a similar book dealing with later developments in this field and one cannot help feeling sorry that Dr. Hart has not found it possible to write it. I can pay this little book no greater tribute than to say that I still recommend it to my students of all grades commencing the study of psychiatry.

E. W. ANDERSON.

Human Behaviour in Illness. By L. GILLIS. Faber and Faber, 1962. Pp. 214. Price 16s.

This quite admirable book was intended, says the foreword, for The South African Nurses' course in Human Relations and for the similar requirement of the General Nursing Council in Britain. It is a clear and sensible account of the approach to the person who is the "cirrhosis in bed 17" and it is unspoiled by patronage or sentimentality. Psychodynamics have been dealt with in a way that avoids controversy, and emotional maturation is particularly well done. While the level is suited to that of a nurse with many other subjects to preoccupy her, the problem of "jargon" has been boldly—and successfully, faced, where precision of language has required it. There is even room for mention of J. B. Watson's Albert! The "subjects for discussion" at the end of each chapter are a particularly helpful feature.

The book is warmly recommended to nurses in training and to all ancillary workers who have contact with patients.

GERALD GARMANY.

Depression and Suicide. Pamphlet No. 2. London: Mental Health Research Fund, 1962. Pp. 15.

This is the second of a series of pamphlets whose purpose it is to inform the interested layman about mental illness and to appeal for his help in combating it. The first number dealt with schizophrenia. *Depression and Suicide* is well written and highly informative. The writer has done his best to bring home to the layman that there is a killing disease called depression, although everybody may at times be depressed. There is at least one paragraph with which one could take issue. In the discussion of the treatment of depressive illness the importance of hospital admission is played down. "Where a depression is clearly consequent upon difficulties in the home, or where suicide is thought possible, hospital treatment may be unavoidable." Otherwise patients suffering from depressive illness should be treated at home or in day hospitals. Few clinical psychiatrists will agree with this policy. Most of them believe that hospital admission for depressive illness should not be presented as a last resort. Nor should it be regarded as conditional on "difficulties at home" and on the "possibility" of

suicide, as if this danger did not exist in every case of depressive illness. It is true that suicidal acts do not occur in every case, although the wish to die is present in all, but psychiatrists are still unable to predict which of their depressed patients are going to commit such an act. This is the kind of problem for the exploration of which they need help from the Mental Health Research Fund and similar bodies. Why give the impression to laymen that the answer is already known?

E. STENGEL.

Typologische Gliederung, Depressive Syndrome und Somatotherapeutische Indikationen. By HEINRICH HOFFET. Basle & New York: S. Karger, 1962. Pp. 52. Price Fr. 9.75.

The author seeks to trace a more defined path through the confusions and uncertainties attendant on the classification and indications for treatment of depressive states. Following Freyhan, Dr. Hoffet believes, rightly, that the effects of treatment must be determined on so-called "target" or "goal" symptoms (Zielsymptome) as well as on broad nosological categories, the classificatory validity of which is widely questioned. The case material comprised a series of 215 patients (122 women, 93 men) selected from a larger group of 484 patients diagnosed as suffering from depression admitted to the Berne clinic between 1.1.56 and 30.9.60. The minimum period of observation was 14 days. The diagnosis was that on discharge and no follow-up was made. In all 290 treatments by E.C.T., imipramine, phenothiazines and neuro-amine oxidase inhibitors either singly or in combination were given and the results were examined and compared. An analysis of the case into separate symptoms, together with the consideration of such others as age, milieu, psychogenesis and other data permitted statistical treatment. The danger of a penny-in-the slot procedure replacing a holistic, basically affective apprehension of the unique individual together with the inability of the method to assess the now well-recognized influence of the milieu in treatment is fully recognized by the author. In general the results obtained confirmed the general experience. E.C.T. was found to be significantly much superior to all other forms of treatment for endogenous and "endo-reactive" depressions and was to some extent "specific" for these disorders (92% remitted or were fit for discharge, 57% for non-cyclothymic depressions). Imipramine proved much less effective (less than 60% remitted, or fit for discharge). This drug appeared to influence the mood more or less equally in all types of depression. When, however, certain individual symptoms including diurnal variation, retardation, self-reproach, anxiety and agitation were considered imipramine was found to be more effective than with hypochondriasis and certain schizophrenic symptoms. On the other hand the phenothiazines showed better results in cases showing these features. The author concludes that imipramine shows an affinity to symptoms commonly regarded as endogenous. It seemed that imipramine controlled anxiety and agitation and thus led to a certain detachment towards painful preoccupations, e.g. self-reproach, which contrasted with that of imipramine which acts directly as an euphoriant. The author remarks on the paradoxical effects of psychotropic drugs and the range of overlap in their effects. This makes a sharp differentiation between neuro- and thymoleptic substances impossible. These are amongst the many conclusions the author draws from this careful and interesting study. Its weaknesses lie in the selection of material and the absence of follow-up. Had this been done the study would have gained considerably in value.

E. W. ANDERSON

Postpartum Psychiatric Problems. By JAMES ALEXANDER HAMILTON. Henry Kimpton, 1962. Pp. 156. Price 51s.

This book draws attention to the serious nature of psychiatric illness developing after childbirth. It shows that we have relatively little precise knowledge of the causes, and there are marked differences of opinion on the significance of the clinical findings and the eventual outcome. It is easy to agree with the author that this is a neglected area of psychiatry.

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E. Stengel

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